

# Exhibit 32



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APPLICATION NUMBER	FILING OR 371(C) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
10/700,329	11/03/2003	Marcus da Silva	MN1-0010US

38356

BROOKS, CAMERON & HUEBSCH, PLLC  
1221 NICOLLET AVENUE, SUITE 500  
MINNEAPOLIS, MN 55403

**CONFIRMATION NO. 5147**  
**POWER OF ATTORNEY NOTICE**



Date Mailed: 06/09/2008

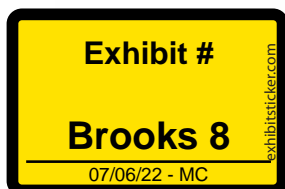
**NOTICE REGARDING CHANGE OF POWER OF ATTORNEY**

This is in response to the Power of Attorney filed 04/28/2008.

- The withdrawal as attorney in this application has been accepted. Future correspondence will be mailed to the new address of record. 37 CFR 1.33.

/kainabinet/

Office of Data Management, Application Assistance Unit (571) 272-4000, or (571) 272-4200, or 1-888-786-0101



ARUBA\_0032683

XR-EDTX1-00052246



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# 9063

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Brooks, Cameron & Huebsch, PLLC  
 1221 Nicollet Avenue, Suite 500  
 Minneapolis, MN 55403

COPY MAILED

JUN 09 2008

In re Application of	:	
Marcus da Silva et al.	:	
Application No. 10/700,329	:	DECISION ON PETITION
Filed: November 3, 2003	:	TO WITHDRAW
Attorney Docket No. MN1-0010US	:	FROM RECORD

This is a decision on the Request to Withdraw as attorney or agent of record under 37 C.F.R. § 1.36(b), filed April 28, 2008.

The request is **APPROVED**.

A grantable request to withdraw as attorney/agent of record must be signed by every attorney/agent seeking to withdraw or contain a clear indication that one attorney is signing on behalf of another/others. A request to withdraw will not be approved unless at least 30 (thirty) days would remain between the date of approval and the later of the expiration date of a time to file a response or the expiration date of the maximum time period which can be extended under 37 C.F.R. § 1.136(a).


The request was signed by Edward J. Brooks, III on behalf of all attorneys/agents associated with customer number 38356. All attorneys/agents associated with customer number 38356 have been withdrawn.

The request to change the correspondence of record is not acceptable as the requested correspondence address is not that of (1) the first named signing inventor; or (2) an intervening assignee of the entire interest under 37 C.F.R. 3.71. Accordingly, all correspondence will be mailed to the assignee. A courtesy copy of this decision will be mailed to address noted on the request to withdraw. If this firm desires to receive future correspondence regarding this application, the proper power of attorney documents must be submitted.

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XR-EDTX1-00052247

Telephone inquiries concerning this decision should be directed to Kimberly Inabinet at 571-272-4618.

  
Kimberly Inabinet  
Petitions Examiner  
Office of Petitions

cc: Vivato, Inc.  
139 Townsend Street, Suite 200  
San Francisco, CA 94107

cc: Christopher R. Ambrose, LLC  
Bend Office  
805 SW Industrial Way, Ste. 201  
Bend, OR 97702

ARUBA\_0032685

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OC000000030365327

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Bib Data Sheet

CONFIRMATION NO. 5147

<b>SERIAL NUMBER</b> 10/700,329	<b>FILING OR 371(c) DATE</b> 11/03/2003 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2617	<b>ATTORNEY DOCKET NO.</b>
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**APPLICANTS**

Marcus da Silva, Spokane, WA;  
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Vahid Tarokh, Cambridge, MA;  
Praveen Mehrotra, Fresno, CA;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/423,660 11/04/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\***  
02/11/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 18	<b>TOTAL CLAIMS</b> 63	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

**ADDRESS**

Vivato, Inc.  
139 Townsend Street, Suite 200  
San Francisco, CA94107

**TITLE**

Directed wireless communication

<b>FILING FEE RECEIVED</b> 966	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit

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XR-EDTX1-00052250